

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

 PAGE 1 OF 5
 FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) Black Conservatives Fund	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00560599 </div>
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee 14A Digital		Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div>MM / DD / YYYY 12 / 02 / 2014</div> </div>	
Mailing Address 1 Scott circle, NW		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">1740.00</div>	
City Washington	State DC	Zip Code 20036	Transaction ID : SE.22542 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div>MM / DD / YYYY 12 / 02 / 2014</div> </div>
Purpose of Expenditure IE Ad Production - Non Contribution Acct		Category/ Type	
Name of Federal Candidate WILLIAM CASSIDY		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: <u>00</u> <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>LA</u>
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; display: inline-block;">49308.52</div>	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input checked="" type="checkbox"/> Other (specify) ▶ Runoff

Full Name of Payee Active Engagement		Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div>MM / DD / YYYY 12 / 02 / 2014</div> </div>	
Mailing Address 44084 Riverside Pkwy		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">500.00</div>	
City Lansdowne	State VA	Zip Code 20176	Transaction ID : SE.22543 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div>MM / DD / YYYY 12 / 02 / 2014</div> </div>
Purpose of Expenditure IE Copywriting - Non Contribution Account		Category/ Type	
Name of Federal Candidate MARY L LANDRIEU		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: <u>00</u> <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>LA</u>
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; display: inline-block;">57658.52</div>	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input checked="" type="checkbox"/> Other (specify) ▶ Runoff

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;">2240.00</div>
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>
(c) TOTAL Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Patrick Krason
[Electronically Filed]

Date

MM / DD / YYYY
12 / 02 / 2014

Signature

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 FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) Black Conservatives Fund		FEC IDENTIFICATION NUMBER ▼ C C00560599	
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee Bonnie Blue Strategies		Date of Public Distribution/Dissemination MM / DD / YYYY 12 / 02 / 2014	
Mailing Address 530 Lakeland Dr		Amount 1200.00	
City Baton Rouge	State LA	Zip Code 70810	Transaction ID : SE.22545
Purpose of Expenditure IE GOTV Consulting - Non Contribution Account		Category/Type	Date of Disbursement or Obligation MM / DD / YYYY 12 / 02 / 2014
Name of Federal Candidate WILLIAM CASSIDY		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: LA
Calendar Year-To-Date Per Election for Office Sought 51508.52		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input checked="" type="checkbox"/> Other (specify) ▶ Runoff	

Full Name of Payee Cross Strategies		Date of Public Distribution/Dissemination MM / DD / YYYY 12 / 02 / 2014	
Mailing Address 13819 Oak Bend dr		Amount 1000.00	
City Baker	State LA	Zip Code 70714	Transaction ID : SE.22547
Purpose of Expenditure IE Communications Strategy Consulting - Non Contribution Account		Category/Type	Date of Disbursement or Obligation MM / DD / YYYY 12 / 02 / 2014
Name of Federal Candidate WILLIAM CASSIDY		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: LA
Calendar Year-To-Date Per Election for Office Sought 52508.52		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input checked="" type="checkbox"/> Other (specify) ▶ Runoff	

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	2200.00
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	

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Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee Hayride Media LLC		Date of Public Distribution/Dissemination MM / DD / YYYY 12 / 02 / 2014	
Mailing Address 9007 Hayride Rd		Amount 600.00	
City Baton Rouge	State LA	Zip Code 70810	Transaction ID : SE.22548
Purpose of Expenditure IE Banner Ads - Non-Contribution Account		Category/Type	Date of Disbursement or Obligation MM / DD / YYYY 12 / 02 / 2014
Name of Federal Candidate WILLIAM CASSIDY		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: LA
Calendar Year-To-Date Per Election for Office Sought 49908.52		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input checked="" type="checkbox"/> Other (specify) ▶ Runoff	

Full Name of Payee Mallory Kennedy Consulting		Date of Public Distribution/Dissemination MM / DD / YYYY 12 / 02 / 2014	
Mailing Address PO Box 1064		Amount 4650.00	
City Baton Rouge	State LA	Zip Code 70821	Transaction ID : SE.22549
Purpose of Expenditure IE Strategy Colsultibng - Non Contribution Account		Category/Type	Date of Disbursement or Obligation MM / DD / YYYY 12 / 02 / 2014
Name of Federal Candidate WILLIAM CASSIDY		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: LA
Calendar Year-To-Date Per Election for Office Sought 57158.52		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input checked="" type="checkbox"/> Other (specify) ▶ Runoff	

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	5250.00
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	

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Full Name of Payee Phoenix Flight Media		Date of Public Distribution/Dissemination 12 / 02 / 2014	
Mailing Address		Amount 400.00	
City	State	Zip Code	Transaction ID : SE.22550
Purpose of Expenditure GOTV Consulting - Non Contribution Account		Category/Type	Date of Disbursement or Obligation 12 / 02 / 2014
Name of Federal Candidate WILLIAM CASSIDY		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: LA
Calendar Year-To-Date Per Election for Office Sought		50308.52	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input checked="" type="checkbox"/> Other (specify) ▶ Runoff

Full Name of Payee Lee Stranahan		Date of Public Distribution/Dissemination 12 / 02 / 2014	
Mailing Address		Amount 3500.00	
City	State	Zip Code	Transaction ID : SE.22551
Purpose of Expenditure IE Digital Ad Production - Non Contribution Account		Category/Type	Date of Disbursement or Obligation 12 / 01 / 2014
Name of Federal Candidate MARY L LANDRIEU		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: LA
Calendar Year-To-Date Per Election for Office Sought		47045.20	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input checked="" type="checkbox"/> Other (specify) ▶ Runoff

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	3900.00
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	

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Full Name of Payee William Tidwell		Date of Public Distribution/Dissemination MM / DD / YYYY 12 / 02 / 2014	
Mailing Address 500 Roosevelt Blvd		Amount 523.32	
City Falls Church	State VA	Zip Code 22044	Transaction ID : SE.22552
Purpose of Expenditure IE Digital Ads - Non Contribution Account		Category/Type	Date of Disbursement or Obligation MM / DD / YYYY 12 / 01 / 2014
Name of Federal Candidate WILLIAM CASSIDY		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: LA
Calendar Year-To-Date Per Election for Office Sought 47568.52		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input checked="" type="checkbox"/> Other (specify) ▶ Runoff	

Full Name of Payee		Date of Public Distribution/Dissemination MM / DD / YYYY	
Mailing Address		Amount	
City	State	Zip Code	Date of Disbursement or Obligation MM / DD / YYYY
Purpose of Expenditure		Category/Type	
Name of Federal Candidate		<input type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	523.32
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	14113.32

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